



Filing ID #10023926

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** David Richardson  
**Status:** Congressional Candidate  
**State/District:** FL27

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2018  
**Filing Date:** 06/14/2018

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Bank of America - Personal Bank Account [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
Fidelity Government Cash Reserves [IH]		\$500,001 - \$1,000,000	None		
DESCRIPTION: This is a tax deferred SEP/IRA account. Income is tax deferred and I was advised not to disclose same.					
Fidelity Government Money Market [BA]		\$500,001 - \$1,000,000	Dividends	\$2,501 - \$5,000	\$5,001 - \$15,000
Fidelity Municipal Money Market [BA]		\$15,001 - \$50,000	Dividends	\$1 - \$200	\$2,501 - \$5,000
Loan to my Campaign account, FL CD27 [OT]		\$250,001 - \$500,000	None		
DESCRIPTION: This is a personal loan that I have made to my campaign account: "David Richardson for Congress, FL CD27"					
Student Transportation Inc - Common shares (STB) [ST]		None	Dividends	\$2,501 - \$5,000	\$15,001 - \$50,000
SYW LP [HE]		None	Capital Gains, Dividends	None	\$100,001 - \$1,000,000
DESCRIPTION: This is an investment fund and the value of the fund fluctuates based on the value of holding and any dividends received.					

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year

\* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
State of Florida, House of Representatives	Salary - State Representative, District 113	\$29,600.00	\$29,600.00
COMMENTS: This is my annual salary for serving as a State Representative.			

## SCHEDULE D: LIABILITIES

None disclosed.

## SCHEDULE E: POSITIONS

None disclosed.

## SCHEDULE F: AGREEMENTS

None disclosed.

## SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**Trusts:** Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

**Exemption:** Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

## CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** David Richardson , 06/14/2018